

FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

10/506469

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 10 | | 2 | | | | |
| 11 | | 1 | | 1 | | |
| 12 | | | 1 | | 1 | |
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| 16 | | | 1 | | 1 | |
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| TOTAL IND. | | | 3 | | 3 | |
| TOTAL DEP. | | | 2 | | 9 | |
| TOTAL CLAIMS | | | 15 | | 19 | |

| | AS FILED | | AFTER 1 ST AMENDMENT | | AFTER 2 ND AMENDMENT | |
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| TOTAL IND. | | | | | | |
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